

<h2 style="margin: 0;">TRANSMITTAL FORM</h2> <p style="font-size: small; margin: 5px 0;">(to be used for all correspondence after initial filing)</p>	<b>Application Number</b>	10/526,690
	<b>Filing Date</b>	(Int'l.) September 2, 2003
	<b>First Named Inventor</b>	Matti SIREN
	<b>Art Unit</b>	1615
	<b>Examiner Name</b>	C. E. Helm
	<b>Attorney Docket Number</b>	514862007400
<b>Total Number of Pages in This Submission</b>		15

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input checked="" type="checkbox"/> Response to Restriction Requirement (10 pages)  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Reply to Missing Parts/Incomplete Application  <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address (1 page)  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____  <input type="checkbox"/> Landscape Table on CD  <div style="border: 1px solid black; padding: 2px; margin-top: 5px;">Remarks</div>	<input type="checkbox"/> After Allowance Communication to TC  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1. Copy of Request for Extension of Term for Responding to Office Action (1 page) 2. Statement Under 37 CFR 3.73(b) and Copy of Assignment (2 pages)

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
<b>Firm Name</b>	MORRISON & FOERSTER LLP (Customer No.: 20872)		
<b>Signature</b>			
<b>Printed name</b>	Michael R. Ward		
<b>Date</b>	April 16, 2008	<b>Reg. No.:</b>	38,651